

ASC Residential PIR Questions

Location information

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| | Location number |
| | Location name |
| | Address of your location |
| | Postcode |
| | Provider number (Sometimes called 'organisation number') |
| | Provider name |
| | Organisation type |

Respondent information

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| | Your name |
| | Your phone number |
| | Your email address |
| | Website address |

1. Changes

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| 1.1 | Describe the impact of changes you have made in the past 12 months on people using your service. Consider the characteristics of good and outstanding ratings to identify relevant changes | W1 | Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people? |
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| 1.2 | Describe the changes you have planned for the next 12 months and the impact you expect these to have on people using your service. Consider the characteristics of good and outstanding ratings to identify relevant changes | W1 | Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people? |
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2. People who use your service

People who use your service: Number of people

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| 2.1 | How many people are currently receiving support with regulated activities as defined by the Health and Social Care Act from your service? | S2.3 | Are people's records accurate, complete, legible, up-to-date, securely stored and available to relevant staff so that they support people to stay safe? |
| 2.2 | Over the past 12 months, how many admissions have been: <ul style="list-style-type: none"> • Permanent • Temporary and not made permanent • For respite | E1 | Are people's needs and choices assessed and care, treatment and support delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes? |
| 2.3 | How many people have you served notice on to leave your service in the past 12 months solely due to a change in their care needs? | R2.4 | How are people who raise concerns or complaints protected from discrimination, harassment or disadvantage? |
| 2.4 | How many people have you served notice on to leave your service in the past 12 months for any other reason? | R2.4 | How are people who raise concerns or complaints protected from discrimination, harassment or disadvantage? |

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| 2.4-a | What were those other reasons? | R2.4 | How are people who raise concerns or complaints protected from discrimination, harassment or disadvantage? |
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People who use your service: Attorneys and deputies

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| 2.5 | How many people using your service have given another person valid and active lasting power of attorney with authority to take decisions about the service you provide? | E7.7 | Do staff recognise when people aged 16 and over, who lack mental capacity, are being deprived of their liberty, and do they seek authorisation to do so when they consider it necessary and proportionate? |
| 2.6 | How many people using your service have a Deputy appointed by the Court of Protection with powers to take decisions about the service that you provide? | E7.5 | When people lack the mental capacity to make a decision, how do staff ensure that best interests decisions are made in accordance with legislation? |

People who use your service: Care needs and preferences

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| 2.7 | <p>Which of the following dependencies do you currently support people with? Select all that apply:</p> <ul style="list-style-type: none"> • Dementia • People detained under the Mental Health Act • Mental health needs • Drug or alcohol misuse • Eating disorders • Sensory impairments • Learning disabilities or autistic spectrum disorder • Physical disabilities | E1.1 | Are people's physical, mental health and social needs holistically assessed, and is their care, treatment and support delivered in line with legislation, standards and evidence-based guidance, including NICE and other expert professional bodies, to achieve effective outcomes? |
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| 2.8 | How many people are currently nursed or cared for in bed? | S5.2 | Do staff understand their roles and responsibilities in relation to infection control and hygiene? |
| 2.9 | Do people who use your service have any specific communication needs or preferences? | C1.3 | Do staff seek accessible ways to communicate with people when their protected and other characteristics under the Equality Act make this necessary to reduce or remove barriers? |
| 2.9-a | How have you met these needs? | C1.3/ R1.5 | <p>Do staff seek accessible ways to communicate with people when their protected and other characteristics under the Equality Act make this necessary to reduce or remove barriers?</p> <p>How does the service identify and meet the information and communication needs of people with a disability or sensory loss? How does it record, highlight and share this information with others when required, and gain people's consent to do so?</p> |
| 2.10 | How do you assess whether people are at risk of malnutrition and dehydration? | E3.4 | How are risks to people with complex needs identified and managed in relation to their eating and drinking? |
| 2.11 | How many of the people who use your service are assessed to be at risk of malnutrition or dehydration? | E3.4 | How are risks to people with complex needs identified and managed in relation to their eating and drinking? |
| 2.12 | How many of the people who use your service need a specialist diet? | E3.4 | How are risks to people with complex needs identified and managed in relation to their eating and drinking? |

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People who use your service: Restrictions and restraints

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| 2.13 | How many people have restraints or restrictions in their care plans? | E7.6 | How does the service promote supportive practice that avoids the need for physical restraint? Where physical restraint may be necessary, how does the service ensure that it is used in a safe, proportionate, and monitored way as part of a wider person-centred support plan? |
| 2.14 | How many incidents of restraint have you recorded in the past 12 months? | E7.6 | How does the service promote supportive practice that avoids the need for physical restraint? Where physical restraint may be necessary, how does the service ensure that it is used in a safe, proportionate, and monitored way as part of a wider person-centred support plan? |
| 2.15 | How many people are subject to an authorisation under the Deprivation of Liberty Safeguards? | E7.5 | When people lack the mental capacity to make a decision, how do staff ensure that best interests decisions are made in accordance with legislation? |
| 2.16 | How many people are the subject of an order made by the Court of Protection that restricts, or deprives them of, their liberty? | E7.5 | When people lack the mental capacity to make a decision, how do staff ensure that best interests decisions are made in accordance with legislation? |
| 2.17 | What are the visiting arrangements for relatives and friends? | C3.7 | Are people's relatives and friends made to feel welcome and able to visit without being unnecessarily restricted? |
| 2.18 | Are there any restrictions or special arrangements on friends or relatives visiting people? | C3.7 | Are people's relatives and friends made to feel welcome and able to visit without being unnecessarily restricted? |

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| 2.18-a | What are these? | C3.7 | Are people's relatives and friends made to feel welcome and able to visit without being unnecessarily restricted? |
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People who use your service: Equality, Diversity and Human Rights

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| 2.19 | How do you make sure you meet the Accessible Information Standard? | R1.5 | How does the service identify and meet the information and communication needs of people with a disability or sensory loss? How does it record, highlight and share this information with others when required, and gain people's consent to do so? |
| 2.20 | <p>Please state whether you have carried out any specific work in the past 12 months to ensure or improve care quality for people in relation to the following equality characteristics:</p> <ul style="list-style-type: none"> • Age • Disability • Gender • Gender reassignment • Race • Religion and belief • Sexual orientation • None of the above | R1.2 | <p>How does the service make sure that a person's care plan fully reflects their physical, mental, emotional and social needs including on the grounds of protected characteristics under the Equality Act? These should include their personal history, individual preferences, interests and aspirations, and should be understood by staff so people have as much choice and control as possible.</p> |

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| 2.21 | <p>What specific work have you undertaken in the past 12 months to ensure your service meets the needs of the people with protected characteristics? Protected Characteristics are Age, Disability, Gender Reassignment, Marriage and civil partnership, Pregnancy and Maternity, Race, Religion or Belief, Sex, and Sexual Orientation</p> | R1.2 | <p>How does the service make sure that a person's care plan fully reflects their physical, mental, emotional and social needs including on the grounds of protected characteristics under the Equality Act? These should include their personal history, individual preferences, interests and aspirations, and should be understood by staff so people have as much choice and control as possible.</p> |
| 2.22 | <p>What has been the impact? Please provide examples for different protected characteristics</p> | E2 | <p>How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?</p> |
| 2.23 | <p>How do you ensure your staffing is sufficient in numbers and quality to meet all the needs of those you care for? Take into consideration all the protected characteristics and preferences of those that you care for</p> | S3.1/ C3.4 | <p>What arrangements are there, including within the rotas, for making sure that staff have the right mix of skills, competencies, qualifications, experience and knowledge, to meet people's individual needs? /</p> <p>How does the service take people's preferences and needs and their protected and other characteristics under the Equality Act into account when scheduling staff?</p> |
| 2.24 | <p>What practical examples can you give as to how you implement and apply human rights principles (fairness, respect, equality, dignity and autonomy) to your service and the impact this has had?</p> | R1.2 | <p>How does the service make sure that a person's care plan fully reflects their physical, mental, emotional and social needs including on the grounds of protected characteristics under the Equality Act? These should include their personal history, individual preferences, interests and aspirations, and should be understood by staff so people have as much choice and control as possible.</p> |

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| 2.25 | How do you assure yourself that you and your workforce understand human rights principles (fairness, respect, equality, dignity, and autonomy)? | E2 | How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support? |
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People who use your service: Funding

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| 2.26 | How many of the people who use your service (i) are funded in full or in part by their local authority, or (ii) receive NHS Continuing Health Care? Include people here even if they pay user charges towards local authority funded care, pay using a local authority personal budget, or have someone paying a third-party top-up on their behalf. | W4.5 | How does the service measure and review the delivery of care, treatment and support against current guidance? |
| 2.27 | How many other people use your service? These people will be self-funded or charity funded, including those in receipt of NHS Funded Nursing Care, and those paying the full cost through their local authority. | W4.5 | How does the service measure and review the delivery of care, treatment and support against current guidance? |

3. Services you provide

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| 3.1 | How many beds does your service currently have for those receiving regulated activities? | N/A | Contextual |
| 3.2 | Do you use assistive technology for people who use your service? | E1.3 | How is technology and equipment used to enhance the delivery of effective care and support, and to promote people's independence? |

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| 3.2-a | What assistive technology do you use? | E1.3 | How is technology and equipment used to enhance the delivery of effective care and support, and to promote people's independence? |
| 3.2-b | What difference has this technology made to the people who use your service? | E1.3 | How is technology and equipment used to enhance the delivery of effective care and support, and to promote people's independence? |
| 3.3 | Are you implementing the NICE guidance 'Oral health for adults in care homes' at your service? | W4.5 | How does the service measure and review the delivery of care, treatment and support against current guidance? |

4. Staff

Staff: Staff numbers

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| 4.1 | How many people are directly employed and deliver regulated activities at your service as part of their daily duties? | S3 | How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs? |
| | Of those: | | |
| 4.2 | How many work 35 hours a week or more? | S3 | How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs? |
| 4.3 | How many work less than 35 hours a week? | S3 | How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs? |

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| 4.4 | How many are registered nurses? | S3.1 | What arrangements are there, including within the rotas, for making sure that staff have the right mix of skills, competencies, qualifications, experience and knowledge, to meet people's individual needs? |
| 4.5 | How many are nursing associates? | S3.1 | What arrangements are there, including within the rotas, for making sure that staff have the right mix of skills, competencies, qualifications, experience and knowledge, to meet people's individual needs? |
| 4.6 | How many staff have left your service in the past 12 months? | S3.1 | What arrangements are there, including within the rotas, for making sure that staff have the right mix of skills, competencies, qualifications, experience and knowledge, to meet people's individual needs? |
| 4.7 | How many staff vacancies do you have? | S3 | How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs? |
| 4.8 | How many full time equivalent posts do you employ? | S3 | How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs? |
| 4.9 | How many hours of care have agency staff provided in the past 28 days? | S3 | How does the service make sure that there are sufficient numbers of suitable staff to support people to stay safe and meet their needs? |

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Staff: Training and qualifications

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| 4.10 | How many of your current staff have completed the Care Certificate? | E2.3 | Do staff and volunteers have effective and regular mentorship, support, induction, supervision, appraisal and training? |
| 4.11 | How many of your current staff have achieved a relevant Level 2 (or above) qualification? For example, this could be an NVQ or Diploma in Health and Social Care. | E2.3 | Do staff and volunteers have effective and regular mentorship, support, induction, supervision, appraisal and training? |
| 4.12 | What training are your staff required to do so they have the skills and knowledge to support people who use your service? | E2.1 | Do people have their assessed needs, preferences and choices met by staff with the right qualifications, skills, knowledge and experience? |
| 4.13 | What impact has this had on the experience and outcomes for people who use your service? | E2.1 | Do people have their assessed needs, preferences and choices met by staff with the right qualifications, skills, knowledge and experience? |
| 4.14 | How many of your care staff have a named person that provides them with regular one to one supervision? | E2.3 | Do staff and volunteers have effective and regular mentorship, support, induction, supervision, appraisal and training? |

Staff: Registered Manager

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| | Is this service required by a condition of registration to have a Registered Manager at this location? | W2.2 | Where required, is there a registered manager in post? |
| | Is there a Registered Manager in post at this location? | W2.2 | Where required, is there a registered manager in post? |
| | When did your last manager leave? | W2.2 | Where required, is there a registered manager in post? |

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| 4.15 | <p>What stage are you at in recruiting a new registered manager?</p> <ul style="list-style-type: none">• Recruiting• Appointed• Waiting for person to start• Waiting for DBS (criminal record) check• Manager application submitted to CQC• Manager application accepted by CQC• Waiting for CQC to process application• Waiting for fit person interview or result• Not applicable | W2.2 | <p>Where required, is there a registered manager in post?</p> |
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5. Commissioners and partnerships

Commissioners and partnerships: Commissioners

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| | <p>Tell us which organisations commission care from you, their contact details and how many people they commission care for:</p> | W5.1 | <p>How does the service work in partnership with key organisations, including the local authority, safeguarding teams and clinical commissioning groups and multidisciplinary teams, to support care provision, service development and joined-up care? Does it do so in an open, honest and transparent way?</p> |
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| 5.1 | Select the number of commissioners | W5.1 | How does the service work in partnership with key organisations, including the local authority, safeguarding teams and clinical commissioning groups and multidisciplinary teams, to support care provision, service development and joined-up care? Does it do so in an open, honest and transparent way? |
| | Commissioning organisation | | |
| | Do you have a named person? | | |
| | Named person | | |
| | Telephone number | | |
| | Email address | | |
| | Number of people | | |
| 5.2 | Please give details of all other organisations that are currently commissioning care from you, if any, in the box below. | W5.1 | How does the service work in partnership with key organisations, including the local authority, safeguarding teams and clinical commissioning groups and multidisciplinary teams, to support care provision, service development and joined-up care? Does it do so in an open, honest and transparent way? |

Commissioners and partnerships: Partnerships

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| 5.3 | How do you work in partnership with other specialist services (for example, speech & language, dementia, tissue viability, nutrition and reablement services)? | W5.2 | Does the service share appropriate information and assessments with other relevant agencies for the benefit of people who use the service? |
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6. Quality assurance and risk management

Quality assurance and risk management: Quality assurance

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| 6.1 | Have you had any safety concerns about premises or equipment in the past 12 months? | S2.6 | How is equipment, which is owned or used by the provider, managed to support people to stay safe? How are the premises and safety of communal and personal spaces (such as bedrooms) and the living environment checked and managed to support people to stay safe? How does the provider manage risks where they provide support in premises they are not responsible for? |
| 6.1-a | What have you done to address these concerns? | S2.6 | How is equipment, which is owned or used by the provider, managed to support people to stay safe? How are the premises and safety of communal and personal spaces (such as bedrooms) and the living environment checked and managed to support people to stay safe? How does the provider manage risks where they provide support in premises they are not responsible for? |

Quality assurance and risk management: Accreditation, memberships and recognition

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| 6.2 | List any accreditation schemes, initiatives, associations or memberships you have been a part of, and any awards or official recognition your service, or individual staff members, have received for the quality of care provided to people who use your service. Only include items from the past 12 months. | W4.3 | How is success and innovation recognised, encouraged and implemented? |
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Quality assurance and risk management: Duty of candour

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| 6.3 | How many notifiable safety incidents have you had in the past 12 months that have triggered the harm thresholds of the duty of candour regulation? | W1.4 | Does the service show honesty and transparency from all levels of staff and leadership following an incident? How is this shared with people using the service and their families in line with the duty of candour, and how does the service support them? |
| 6.3-a | Have you kept copies of what you told the people using your service - or people lawfully acting on their behalf - when the incident happened (including an account of that incident, further enquiries anticipated, and an apology)? | W1.4 | Does the service show honesty and transparency from all levels of staff and leadership following an incident? How is this shared with people using the service and their families in line with the duty of candour, and how does the service support them? |
| 6.3-b | Have you kept copies of what you put in writing to them (setting out support provided, enquiries made and their results, and the apology)? | W1.4 | Does the service show honesty and transparency from all levels of staff and leadership following an incident? How is this shared with people using the service and their families in line with the duty of candour, and how does the service support them? |

Quality assurance and risk management: Medicines and controlled drugs

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| 6.4 | Do you administer medicines? | S4.2 | How does the service make sure that people receive their medicines (both prescribed and non-prescribed) as intended (including controlled drugs and 'as required' medicines), and that this is recorded appropriately? |
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| 6.4-a | Do you currently administer controlled drugs? | S4.1 | Is the service's role in relation to medicines clearly defined and described in relevant policies, procedures and training? Is current and relevant professional guidance about the management of medicines followed? |
| 6.4-b | Do you use enteral feeding to administer medicines? | S4.6 | How do staff assess the level of support a person needs to take their medicines safely, particularly where there are difficulties in communicating, when medicines are being administered covertly, and when undertaking risk enablement assessments designed to promote self-administration? |
| 6.4-c | Do you ever administer medicines covertly? | S4.4 | Are there clear procedures for giving medicines covertly, in line with the Mental Capacity Act 2005? |
| 6.4-d | How many medicine recording errors have there been in the past 12 months? | S6.3 | How are lessons learned and themes identified, and is action taken as a result of reviews and investigations when things go wrong? |
| 6.4-e | How many medicine administration errors have there been in the past 12 months? | S6.3 | How are lessons learned and themes identified, and is action taken as a result of reviews and investigations when things go wrong? |

Quality assurance and risk management: Deaths

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| 6.5 | Have you notified us of any deaths in the past 12 months? | | |
| 6.5-a | How many of these deaths were followed by an inquest? | S6.5 | How effective are the arrangements to respond to relevant external safety alerts, recalls, inquiries, investigations or reviews? |

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| 6.5-b | How many of the people who died were subject to a DoLS authorisation? | S6.2 | What are the arrangements for reviewing and investigating safety and safeguarding incidents and events when things go wrong? Are all relevant staff, services, partner organisations and people who use services involved in reviews and investigations? |
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Quality assurance and risk management: Complaints and compliments

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| 6.6 | In the past 12 months, how many complaints were made about your service that were managed under your complaints procedure? | R2 | How are people's concerns and complaints listened and responded to and used to improve the quality of care? |
| 6.6-a | What are the main complaints you have received in the past 12 months and what have you changed as a result to improve your service? | R2 | How are people's concerns and complaints listened and responded to and used to improve the quality of care? |
| | Of the complaints you have had in the past 12 months: | | |
| 6.6-b | How many were made within the past 28 days? | R2.3 | How effectively are complaints handled, including ensuring openness and transparency, confidentiality, regular updates for the complainant, a timely response and explanation of the outcome, and a formal record? |
| 6.6-c | How many have been resolved? | R2.5 | To what extent are concerns and complaints used as an opportunity to learn and drive continuous improvement? |
| 6.6-d | Of the complaints that were resolved, how many were resolved in 28 days? | W4.4 | How is information from investigations and compliments learned from and used to drive quality? |

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| 6.7 | Tell us the most common types of compliment people have given your service over the past 12 months | R2 | How are people's concerns and complaints listened and responded to and used to improve the quality of care? |
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7. Anything else

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| 7.1 | Tell us here, anything else that you wish to share about your service and that is not included in your other answers. | | |
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